



Application for Assigned Vehicle Identification Number

Important: Under the applicable provisions of the Maryland Vehicle Law, when the vehicle identification number of a vehicle becomes illegible, obliterated or has been removed, the owner must make immediate application for an assigned vehicle identification number of the State Motor Vehicle Administration.

VIN number assigned _____

Owner's Name (please print) _____

Co-Owner's Name (please print) _____

Address _____

In making this application for an assigned vehicle identification number, I agree that the number will be used on a homemade trailer or a substitution of the vehicle identification plate issued by the manufacturer. When properly affixed, it will become the identification number of the vehicle in all future transactions.

Year _____ Make _____ Model _____ Body Style _____

If vehicle is a homemade trailer, check type:

☐ Boat Trailer ☐ Utility Trailer ☐ Camping Trailer ☐ Other (specify) _____

If not a homemade trailer, check reason for application:

☐ Reconstructed Motor Vehicle ☐ V.I.N missing _____ ☐ Other (specify) _____

In making this application, permission is granted to any Maryland Law Enforcement Agency or Motor Vehicle Administration representative to search the vehicle listed for the vehicle identification number. Full permission is granted to remove any part of the vehicle or any item necessary to facilitate the search. I assume full responsibility for this action and absolve the Agency and its representative from all liability should any damage occur to the vehicle.

Should any litigation arise from the issuance of an assigned vehicle identification number, I will indemnify and save harmless the State of Maryland, Motor Vehicle Administration, its representatives, or any Maryland Police Agency and its representatives.

I certify, under penalty of perjury that the statements made within are true and correct to the best of my knowledge, information and belief.

Owner's Signature _____

Date _____

Co-Owner's Signature _____

Date _____

MVA Use Only:

I, the undersigned authorized representatives of the Motor Vehicle Administration, declare that this assigned number was affixed to the above referenced vehicle on the:

(Location) _____ by: _____ MVA Representative

Odometer Reading at time of inspection: _____

☐ P.V.I.N. missing ☐ T.V.I.N. missing ☐ No record N.C.I.C. Signature of Agent _____ Date _____

Comments: _____